

## **EMPLOYMENT POLICY:**

### **ARTICLE I: PURPOSE:**

This document is a component of the Town of Windham's ("the Town") employment policy as adopted by the Board of Selectmen ("the Board"), with the intent of providing a uniform basis for administration of the recruitment/hiring, orientation, ongoing evaluation and termination of employees.

### **ARTICLE II : AUTHORITY:**

This policy is adopted by the Board in accordance with their authority granted by RSA 41:8 to manage the prudential affairs of the Town.

### **ARTICLE III : POLICY STATEMENT:**

This policy is intended to provide a comprehensive, standard approach for all departments to follow when a new employee needs to be hired by the Town. Once the new employee has been hired and completed an orientation, the employee will be governed by the Town's existing Personnel Policy and after one year of employment by these policies or a collective bargaining agreement ("CBA") if applicable. The Personnel Policy and/or CBA also covers the process to be followed when disciplining or terminating an employee, however, the policy herein is intended to provide administrative guidance as to the steps to be followed once a decision to terminate has been made, or upon voluntary resignation or retirement.

### **ARTICLE IV : RESPONSIBILITIES:**

- 1) The Town Administrator shall be responsible for the overall administration of the policy.
- 2) Department Heads shall be responsible for adherence to this policy within their departments as applicable.

### **ARTICLE V : RECRUITMENT/HIRING PROCEDURES:**

- 1) Job Creation/Description: All job descriptions shall be maintained by the Town Administrator in a central file. Job descriptions may be amended, as needed, by the Board of Selectmen. Job descriptions shall be reviewed periodically by the Department Head, and any proposed changes shall be presented to the Town Administrator for approval and presentation to the Board.

Job descriptions for newly created positions shall be drafted by the Department Head, reviewed by the Town Administrator, and presented to the Board for approval at the time the position is requested. The job description shall be written in accordance with the Town's standard format (*refer to the complete set of ADA job descriptions maintained in the Administration Office*) and will generally outline the position's duties and responsibilities and the prerequisite knowledge, skills and abilities.

- 2) Advertisement: For all job openings, the Department Head shall draft a job advertisement (*see Appendix A for template*) and forward it to the Town Administrator for approval. In conjunction with the Town Administrator, the Department Head shall determine which of the following processes will be utilized based on the open position:

*“Local Area Search”* – This would generally cover part-time positions and full-time positions not including Department Head or “Deputy” Department Head positions.

For a local area search, the job advertisement shall be forwarded to the Administration office, which will then place the advertisement on the Town website, in the Windham Independent, Eagle-Tribune, Local Government Center website (and Town & City Magazine) and Primex website, with an application acceptance period of a minimum of four weeks.

*“Wide Area Search”* – This would generally cover all positions for which a local area search would not be sufficient, specifically including Department Head or “Deputy” Department Head positions. Also, this would generally apply to positions requiring specialized knowledge such as Town Planner, Recreation Coordinator, Police Prosecutor, Police Officer, Fire Inspector, Firefighter and any others as determined by the Town Administrator.

For a wide area search, the job advertisement shall be forwarded to the Administration office, which will then include the advertisement in the above referenced publications and, based on Department Head request, may extend the advertisement to a regional publication such as The Union Leader and/or The Boston Globe. In addition, the Department Head may place the advertisement in relevant trade publications, websites and/or university programs as applicable, either on a regional or national level, to include but not be limited to the following:

*Town Administrator* – International City Managers Association

*Police Department* – NH Chiefs of Police Assoc, NH Police Academy

*Fire Department* – Fire Chief/Fire House magazine, International Association of Fire Chiefs, NH Fire Academy

*Director of Planning & Development / Town Planner* – NH Planners Association, American Planners Association

*Asst Town Administrator/Finance Director* – NH Government Finance Officers

*Transfer Station Manager* – Solid Waste Association of North America, Northeast Resource Recovery Association

*Assessor* – NH Association of Assessing Officials, International Association of Assessing Officials

Job advertisements will be funded through the individual department budgets.

- 3) Application Process: For management level positions, a resume will be required. For all other positions, a job application or resume will be accepted, unless specifically stated in the job advertisement. Once an initial review of the applications has been completed, the Department Head collecting the applications shall provide all candidates that have submitted applications with written

acknowledgement of their status utilizing the Town's standard format (see *Appendix B*).

4) Interview / Testing / Selection Process:

- a. In the case of Fire personnel, if candidates are on the State certified list, testing may not be required. If candidates are not on the State list, a standardized testing process will be conducted by the Chief of the department.
- b. In the case of Police personnel a standardized testing process will be conducted by the Chief of the department. The Chief is authorized to waive the testing portion of the process for those candidates who are currently certified police officers recognized by the State of New Hampshire Police Standards.
- c. For candidates in all departments, other than Department Head or recognized second in command positions, the Department Head will conduct interviews of selected candidates and ensure that the same questions are asked of each candidate, in order to maintain a high standard of validity. A standard "Oral Interview Scoring Sheet" shall be used by the interviewer(s) (see *Appendix C*). Also in *Appendix C*, Department Heads shall refer to the guide to proper and improper pre-employment inquiries adapted from the Regulation of NH Commission for Human Rights. Once the Department Head has further narrowed the candidates to the top two or three, the Town Administrator will interview the finalists and a joint recommendation will be made to the Board of Selectmen.
- d. For Department Head or recognized second in command positions, the Town Administrator and Board of Selectmen will determine if a committee will conduct the interviews and, if so, what the makeup of that committee will be. The general questions used during interviews shall be the same for each candidate in order to maintain a high standard of validity. Questions asked as follow-ups to gain further incite to a candidates' responses may differ for each candidate.

5) Employment Offers / Background Checks: Once the testing and interview processes have been completed and the Department Head and Town Administrator have selected a top candidate, they shall submit the name of the candidate to the Board of Selectmen for approval to extend a formal employment offer. All written final offers of employment, to be signed by the successful applicant, shall be prepared by the Administrative offices. Notwithstanding the formal approval of the Board of Selectmen, Department Heads, upon approval of the Town Administrator, may offer a conditional employment offer for the purposes of conducting a detailed background check (see *Appendix D*). Background checks shall be conducted on all candidates who have been extended a conditional offer of employment and shall be handled as follows:

- a. All candidates for full or part-time positions with the Town will complete a general "Authorization to Release Information" which must be signed by the candidate and notarized, and a "Consent Form" to submit to a drug screening (see *Appendix E*). Additionally, all candidates will complete a

“Personal History Statement” (*see Appendix F*), which must be signed by the candidate and notarized.

As deemed necessary by the Department Head or Town Administrator, the “Confidential Questionnaires to Educational Institutions, Employers and/or Physicians” may be utilized in order to obtain further information about the candidate (*see Appendix G*). If the questionnaire to Physicians is used, the candidate shall also be required to sign an “Authorization to Release Medical Information” (*see Appendix G*).

- b. A State criminal records and driving record check(s) will be required of the potential new hire. The Department Head shall attain this information for at least the last three years at a minimum. For NH residents, the criminal records check will be obtained by the Human Resources (“HR”) Coordinator at the Town’s expense. For residents of all other states, the potential employee will be required to obtain their own records check(s). All potential employees will also be required to obtain their own driving record(s), the cost of which will be eligible for reimbursement by the Town once the employee has been hired.\*
- c. Personal and/or business references will be checked by the Department Head for all potential new employees. A standardized format for telephone reference checks is attached in *Appendix H* (business and personal).
- d. All candidates for Police Patrol or Firefighter positions with the Town will provide the Town with a certified financial credit history\*. For all other candidates, the Town reserves the right to require a credit history if deemed necessary based on position responsibilities or to clarify information obtained as part of the initial background check. See Appendix I for handout available for distribution to candidates regarding how to contact the credit bureaus.
- e. In addition to the above, all candidates for full or part-time positions with the Town who have been extended a formal offer of employment will undergo a physical exam to include a 5-panel drug screening, prior to commencing employment, at the Town’s expense. The Town shall send the potential employee, with a copy of the job description, to a clinic utilized by the Town for all pre-employment screenings (*see Appendix J*).

\* *For Police candidates, this information will be obtained by the Chief, as mandated by the NH Police Standards and Training.*

6) Final Hiring / Public Announcement: Once the Selectmen have made the appointment and the job offer letter has been signed by the candidate, the name of the successful candidate will be made available as requested. In the case of Department Head or “Deputy” positions, the Town Administrator will prepare a press release for distribution to the local newspapers.

7) Record Retention: Upon completion of the hiring process, Department Heads will forward all application and hiring materials to the Town Administrator for storage in accordance with the State’s record retention laws. All background check

information, including copies of credit reports, will be retained under separate cover, filed with the secured personnel files in the Administrative Offices.

#### **ARTICLE VI : ORIENTATION PROCEDURES:**

- 1) Orientation Meeting: At least one week prior to the new employee's scheduled first day of work, the Department Head shall schedule a meeting with the employee, as well as the HR Coordinator, to be held at the administrative offices. The Department Head shall also notify the IT Director and the Chair of the Public Relations ("PR") Committee of this meeting. The following will be covered at this orientation meeting:
  - a. The HR Coordinator shall provide the employee with a detailed overview of all town benefits applicable to that employee, as well as the forms the employee will be required to fill out. The employee will be allowed to take these forms with him/her to review, and the employee will be responsible for submitting all completed forms back to the HR Coordinator prior to beginning work for the Town.
  - b. The Department Head shall provide the employee with a copy of the Town's Personnel Policy, Safety Policy and Drug-Free Workplace Policy (a CD with these policies will be provided for the employee to retain), as well as a town organization chart (*provided in Appendix K*). The Department Head shall go over these policies in detail with the employee and discuss any issues specific to the employee's department. The employee shall submit a completed sign-off form for each of these policies, to be submitted to the HR Coordinator with all other forms prior to beginning work for the Town.
  - c. The IT Director shall meet with the employee to provide an overview of the employee's computer workstation, as applicable, and determine any specific IT equipment needs.
  - d. The PR Committee representative shall meet with the employee to write a brief biography of the employee and take a picture for inclusion on the Town's intranet website. The PR Committee shall send the picture to the Fire department for purposes of creating the employee's town identification badge.
  - e. Once the administrative portion of the orientation meeting has been completed, the Department Head shall bring the employee to all town offices and give a tour of the facilities.
  - f. The Department Head shall be responsible for ensuring the employee is provided with any department specific training and/or assigned equipment, prior to the employee beginning work for the Town.

#### **ARTICLE VII : PERFORMANCE EVALUATIONS:**

Employees are evaluated by respective Department Head or Town Administrator on their ongoing job performance. A description of the evaluation process can be found in Article XXIV of the Personnel Policy.

**ARTICLE VIII : TERMINATION:**

- 1) Decision to Resign: Upon the employee's decision to resign or retire, the employee shall provide sufficient notice to the Department Head and/or Town Administrator. Under normal circumstances sufficient notice is considered to be two weeks except with Department Head positions where four weeks is appropriate.
- 2) Department Head Notification: Upon receiving an employee's termination notification, the Department Head and/or Town Administrator shall immediately notify, in writing, the HR Coordinator and IT Director of the employee's last scheduled day of employment. The Department Head shall also notify the employee that his/her last scheduled day of work shall include an exit meeting at the administrative offices.
- 3) Exit Meeting: The employee shall meet with the Department Head and/or Town Administrator and complete all necessary paperwork with the HR Coordinator. The employee shall also turn over any Town issued items such as keys, badge, etc. This must be completed prior to the Department Head approving the employee's final paycheck.

**ARTICLE IX : REFERENCES:**

The Town will provide references for employees upon request, as follows:

- a. If a prospective employer calls the employee's Department Head or Town Administrator, and a signed release has not been obtained by the employee, the Department Head or HR Coordinator shall provide employment dates, position and salary information.
- b. If a prospective employer has obtained a signed release from the employee, the Department Head, upon request, shall provide further detail regarding the factual aspects of the employee's performance including evaluations and/or disciplinary actions that have been documented in the employee's official personnel file.
- c. If a prospective employer requests a copy of the employee's personnel file, and a signed release has been provided, the HR Coordinator shall release a copy of the file in its entirety directly to the prospective employer.
- d. If an employee requests a written reference upon resignation, the Department Head shall provide a letter based on factual information regarding the employee's performance as well as written evaluations and/or disciplinary actions as documented in the employee's official personnel file.

**ARTICLE X : SEVERABILITY:**

In the event any Article or Section of this policy is declared to be illegal, void, or invalid in whole or in part by a Court of competent jurisdiction after all appeals, if any, have been exhausted, all other Articles and Sections of this policy shall remain in full force and effect to the same extent as if that invalidated article or section had never been incorporated in this policy.

**ARTICLE XI : CHANGES:**

This policy may be amended from time to time by majority vote of the Board of Selectmen at a regularly scheduled Selectmen's meeting.

**ARTICLE XII : EFFECTIVE DATE:**

This policy, and any amendments made thereto shall take effect immediately following a majority vote of the Board of Selectmen at a regularly scheduled Selectmen's meeting and being recorded with the Town Clerk.

**Adopted by the Board of Selectmen - Date: September 24, 2007**

\_\_\_\_\_  
**Alan Carpenter**

\_\_\_\_\_  
**Dennis Senibaldi**

\_\_\_\_\_  
**Roger Hohenberger**

\_\_\_\_\_  
**Margaret Crisler**

\_\_\_\_\_  
**Bruce Breton**  
Board of Selectmen

**APPENDIX A**

*Example advertisement for Wide Area Search:*

**FIRE CHIEF**

Salary: \$65,148 - \$79,224 (DOQ) annually, commensurate with qualifications and experience. Excellent benefits.

Town of Windham, New Hampshire (population 14,000) seeks proven, experienced fire professional with significant and progressive management experience in all phases of municipal fire services. Windham is a combination full-time/call department with 35 employees providing complete fire and EMS services, with a municipal budget of \$1.97 million.

Responsible for planning, development and direction of Fire Department activities in a growing community. The ideal candidate must have a minimum of a Bachelor's degree in Fire Services or related field and seven years of progressively responsible experience in the fire service, with a minimum of five years in a senior supervisory capacity or an equivalent combination of education and experience which demonstrates possession of the required knowledge, skills, and abilities. Successful candidate must have effective leadership and administrative abilities and excellent interpersonal and written/oral communication skills. The position requires residency within a 12 minute commute to the Fire Station, with residency within Windham preferred.

Send detailed resume marked "Confidential" to the Town Administrator, P.O. Box 120, Windham NH 03087. EOE. Drug screening is a condition of employment. Resumes must be received by December 16, 2005. All applications kept confidential. Faxes and e-mails not accepted. For additional community information, see [www.windhamnewhampshire.com](http://www.windhamnewhampshire.com).

Date: October 31, 2005

Type: Two (2) column ad

When: Sunday Edition November 6, 2005

*Example advertisement for Local Area Search:*

**Assistant Town Clerk  
Windham, New Hampshire**

The Town of Windham is accepting applications for the position of Assistant Town Clerk. The candidate will assist the Town Clerk in all aspects of the Clerk's office. The position is full time with a starting hourly rate of \$13.8632, plus excellent benefits. Applications may be obtained at the Administrative Offices, 4 North Lowell Rd, P.O. Box 120, Windham NH 03087. EOE. Drug screening is a condition of employment. Applications must be received by February 15, 2006.

**APPENDIX B**

**Rejection Letter (For non-management staff or positions without secondary parts of hiring process)**

DATE

«Title» «FirstName» «LastName»  
«Address1»  
«City», «State» «PostalCode»

**RE: XXXXXX Position - Windham, NH**

Dear «Title» «LastName»:

Please be advised that we have completed our review of all applicants for the position of XXXXXX. Unfortunately, I cannot offer you an interview at this time.

On behalf of the Town, I wish to extend my appreciation for having expressed an interest in our position, and wish you the best in your future endeavors.

Very truly yours,

NAME OF DEPARTMENT HEAD  
POSITION

**APPENDIX B (continued)**

**Rejection Letter (Management Positions or ones with supplemental processes - No Supplemental Questionnaire Requested)**

Dear «Title» «Last\_Name»:

On behalf of the Town of Windham Board of Selectmen, I would like to take this opportunity to thank you for your interest in the position of Police Chief. We were very pleased to have so many qualified individuals to consider, yourself included, and our decision was certainly not an easy one given the abilities possessed by each candidate.

At this time I must advise you that, after careful consideration and review of each applicant, you have not been selected as one of those candidates to advance in our selection process.

Once again, please accept our thanks for your interest, and best wishes for success in all your future endeavors.

\*\*\*\*\*

**Rejection Letter (Management Positions or ones with supplemental processes - After Supp. Quest./Pre-Assessment)**

Dear «Title» «Last\_Name»:

On behalf of the Town of Windham Board of Selectmen, I would like to take this opportunity to thank you for your interest in the position of Police Chief. We were very pleased to have so many qualified individuals to consider, yourself included, and our decision was certainly not an easy one given the abilities possessed by each candidate.

At this time I must advise you that, after careful consideration and review of each applicant, you have not been selected as one of those candidates to take part in the assessment center phase of our recruitment.

Once again, please accept our thanks for your interest, and best wishes for success in all your future endeavors.

\*\*\*\*\*

**Rejection Letter (Management Positions or ones with supplemental processes - Pre-Final Interview)**

Dear «Title» «Last\_Name»:

This is to advise you that the Board of Selectmen has completed its selection of the final candidates for the position of Police Chief.

The Board carefully reviewed all the materials from the Assessment Center and selected three individuals for the final interview phase of our process. We were encouraged by the quality of individuals who participated in our recruitment process and challenged to select only a few to continue to the final oral interview before the Board. Unfortunately, at this time, you were not selected as one of the finalists.

On behalf of the Board of Selectmen, I would like to take this opportunity to thank you for your interest in our position and extend my best wishes for success in all your future endeavors.

**ORAL INTERVIEW SCORING SHEET**

**APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

QUESTIONS	COMMENTS	SCORE
Did the applicant respond to questions in a logical, concise and complete manner?		
Did the applicant give evidence that they possessed sufficient job knowledge or the concepts required to learn the job?		
How often did the applicant respond to questions with appropriate vocabulary and appropriate content to the response?		
How confident are you that this applicant would be able to successfully respond to personnel problems?		
How often did the applicant's manner of presentation, appearance, and sociability give evidence that they would be suitable for the job?		
How often did the applicant's personality, emotional stability, and reaction to stress give evidence that they would be suitable for the job?		
How often did the applicant's attitude towards a career, motivation, and realism of their perception of the job give evidence that they would be suitable for the job?		
How confident are you that this applicant would be able to successfully relate to specialized assignments?		
How confident are you that this applicant would be able to successfully perform the duties of the position?		
Would candidate bring new ideas / good work ethics to the department?		
<b>TOTAL SCORE</b>		
<p><b>QUESTION RATING:</b></p> <p>0 Failure to answer</p> <p>65-70 Minimal response and/or seldom proper response</p> <p>75-85 Often answered with a solid response</p> <p>85-95 Above average responses</p> <p>95-100 Excellent responses with the best possible answers</p> <p>Interviewer's Signature _____</p>		

**APPENDIX C (continued)****Adapted From****Regulation of the New Hampshire  
Commission for Human Rights  
Hum 406.03 Guide to Pre-Employment Inquiries**

The following is intended as a guide only. It is not an inclusive list of proper and improper pre-employment inquiries.

	<b>Examples of Proper Inquiries</b>	<b>Examples of Improper Inquiries</b>
(a) Name	Whether applicant has worked for this employer or another under a different name and, if so, what name. Name under which applicant is known to reference if different from present name.	Inquiry into original name where it has been changed by court order or marriage. Inquiry about a name which would divulge marital status, lineage, ancestry, national origin or descent.
(b) Birthplace and Residence	Inquiry into place of residence and length of time at present address.	Inquiry into birthplace of applicant, or birthplace of applicant's parents, spouse or relatives. Do not require prior to hiring: birth certificate, naturalization or baptismal record.
(c) Religion or Creed	None.	Inquiry into applicant's religious denomination, religious affiliations, church, parish, pastor or religious holidays observed.
(d) Race or Color	None, (except for inquiries made for statistical purposes on a form separate from the application when the information will be used only for statistical purposes and answer or failure to answer does not affect hiring decision, and inquiries required by state or federal law or regulation.)	Inquiries into race, color of skin, eyes, hair, etc.
(e) Photographs	Photographs may be required only after hiring.	Do not request that applicant provide a photograph before hiring.
(f) Citizenship	Whether applicant is legally permitted to work in the United States.	Inquiries regarding the citizenship of applicant or family members.
(g) National Origin and Ancestry	None, (except for inquiries made for statistical purposes only, in the same manner as statistical inquiries regarding race or color, and inquiries required by state or federal law or regulation.)	Inquiry into an applicant's lineage, ancestry, national origin, descent, parentage, or nationality. Nationality of parents or spouse.

(h) Relatives	Inquiries into names of relatives employed by the Town/City. Name and address of person to be notified in an emergency.	Inquiry into names or addresses of relatives other than those employed by the district.
(i) Organizations	Inquiries requiring membership in unions and trade or professional organizations.	Inquiries regarding membership in social fraternities, lodges or organizations other than unions and trade or professional organizations.
(j) References	Requests for names of persons willing to provide professional and/or character references for applicant.	Request for name of applicant's pastor or religious leader.
(k) Sex and Family Composition	Inquiries as to sex may be made only when required by bona fide occupational qualification (BFOQ) or for statistical purposes in the same manner as for statistics on race or color, or when required by state or federal law or regulation.	Inquiries regarding applicant's sex except for BFOQ or statistical purposes or when required by law or regulation. Inquiries as to whether applicant has children or other dependents.
(l) Criminal Record	Inquiries regarding convictions within the past five years.	Inquiries regarding arrest record.
(m) Height and Weight	Proper only when required by bona fide occupational qualification.	All inquiries on height and weight except when required by a bona fide occupational qualification.
(n) Marital Status	None.	All inquiries regarding applicant's marital status.
(o) Handicap <sup>1</sup>	Inquiry regarding how an applicant with a <u>known</u> disability would perform the essential functions of the job with or without accommodations.	General, non-job related inquiries regarding handicap or disability.
(p) Age and Date of Birth	Inquiry as to age if required by law, for using a firearm or serving alcohol.	Inquiry into age or birth date when not required by law.

<sup>1</sup>The Equal Employment Opportunity Commission has issued guidelines on pre-employment inquiries under the Americans with Disabilities Act. The guidelines prohibit employers from asking questions that may lead to information about the nature, extent, or scope of a disability prior to the time that an offer of employment is made.

**APPENDIX D**

**Conditional Offer of Employment**

(Used for Police and Fire Department Staff)

**Purpose**

The purpose of this agreement is to extend to the applicant a conditional offer of employment. The applicant must meet the below listed terms and conditions before being hired by this Department. A final offer of employment will be extended to you only after you have satisfied all the requirements established by this Department. All entering applicants for the listed position of Firefighter are required to successfully comply with these same conditions.

**Parties in Agreement**

This agreement is between the Town of Windham, New Hampshire Fire Department and

\_\_\_\_\_ whose Date of Birth is \_\_\_\_\_  
and Social Security Number is \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_.

**Terms and Conditions of Agreement**

An applicant must meet the following terms and conditions:

- A. Sufficient physical, mental, and emotional condition, as determined by a medical history and examination, necessary to perform the essential functions of the above position.
- B. Additional requirements specified, which include (items that are checked):
  - Satisfactory completion of an extensive investigation into the candidate's background.
  - Sufficient physical, mental and emotional condition as determined by a Medical History and Examination necessary to perform the essential functions of the above position.
  - Meet Lateral Transfer requirements as described in Fire 703.01.
  - Graduation from High School or equivalent.
  - Satisfactory Completion of The State of New Hampshire Fire Standards and Training Certified Career Fire Fighter Requirements (C2/F2)
  - Satisfactory completion of New Hampshire Ambulance Providers License
  - National Registry Emergency Medical Technician - B License
  - Valid State of New Hampshire Commercial Drivers License - B
  - Satisfactory completion of a one year probationary period.

Final offer of employment and appointment to this position must be approved by the Town of Windham, NH, Board of Selectmen.

**Length of this Agreement**

This conditional offer of employment shall remain valid and in effect for 30 days from the effective date of this agreement. In addition, this officer shall be immediately withdrawn upon the applicant's failure to meet any of the above terms and conditions. The effective date of this agreement is \_\_\_\_\_.

**ACKNOWLEDGEMENT**

Successful compliance with these job related and necessary conditions of employment is required to carry out the essential functions of the above position. I have read and understand the terms of this Conditional Offer of Employment and agree to abide by these terms.

Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Agency Representative \_\_\_\_\_

Signature of Agency Representative \_\_\_\_\_

Date \_\_\_\_\_

**APPENDIX D (continued)**

(Used for Non Police and Non Fire Department Staff)

**Purpose**

The purpose of this agreement is to extend to the applicant a conditional offer of employment. The applicant must meet the below listed terms and conditions before being hired by this Department. A final offer of employment will be extended to you only after you have satisfied all the requirements established by this Department. All entering applicants for the listed position of \_\_\_\_\_ are required to successfully comply with these same conditions.

**Parties in Agreement**

This agreement is between the Town of Windham, New Hampshire and \_\_\_\_\_ whose Date of Birth is \_\_\_\_\_ and Social Security Number is \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_.

**Terms and Conditions of Agreement**

An applicant must meet the following terms and conditions:

- A. Sufficient physical, mental, and emotional condition, as determined by a medical history and examination, necessary to perform the essential functions of the above position.
- B. Additional requirements specified, which include (items that are checked):
  - Satisfactory completion of an extensive investigation into the candidate's background.
  - Sufficient physical, mental and emotional condition as determined by a Medical History and Examination necessary to perform the essential functions of the above position.

Final offer of employment and appointment to this position must be approved by the Town of Windham, NH, Board of Selectmen.

**Length of this Agreement**

This conditional offer of employment shall remain valid and in effect for 30 days from the effective date of this agreement. In addition, this officer shall be immediately withdrawn upon the applicant's failure to meet any of the above terms and conditions. The effective date of this agreement is \_\_\_\_\_.

**ACKNOWLEDGEMENT**

Successful compliance with these job related and necessary conditions of employment is required to carry out the essential functions of the above position. I have read and understand the terms of this Conditional Offer of Employment and agree to abide by these terms.

Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Agency Representative \_\_\_\_\_

Signature of Agency Representative \_\_\_\_\_

Date \_\_\_\_\_



**APPENDIX E (continued)**

**CONSENT FORM**  
**(Pre-Employment)**

I, \_\_\_\_\_, hereby state that I am a prospective employee of the Town of Windham and therefore am required to submit to drug and/or alcohol testing. I further state that I have received, read, and understand the Town of Windham Drug Free Workplace Policy regarding drugs and alcohol testing of employees, and do consent to this testing of my own free will with full knowledge and understanding of the possible ramifications of a positive test result. Consent shall be witnessed by Town management personnel, preferably Department Head. Test results shall be released to specified administrative personnel under strict confidentiality, including employee or applicant.

CHECK TESTS REQUIRED

\_\_\_\_\_DRUGS

\_\_\_\_\_ALCOHOL

\_\_\_\_\_  
Signature of Above Name Individual

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed by:

\_\_\_\_\_  
Title





2. Employer \_\_\_\_\_  
Address \_\_\_\_\_  
    Street Address  
    \_\_\_\_\_  
    City/Town                      State                      ZipCode  
Tel # \_\_\_\_\_ Job Title \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Name of Co-Worker \_\_\_\_\_  
Date started \_\_\_\_\_ Date left \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_  
Address \_\_\_\_\_  
    Street Address  
    \_\_\_\_\_  
    City/Town                      State                      ZipCode  
Tel # \_\_\_\_\_ Job Title \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Name of Co-Worker \_\_\_\_\_  
Date started \_\_\_\_\_ Date left \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

4. Employer \_\_\_\_\_  
Address \_\_\_\_\_  
    Street Address  
    \_\_\_\_\_  
    City/Town                      State                      ZipCode  
Tel # \_\_\_\_\_ Job Title \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Name of Co-Worker \_\_\_\_\_  
Date started \_\_\_\_\_ Date left \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**D. Military History:**

1. Have you served in the U.S. Armed Forces? Yes ( ) No ( )

2. Dates of Service: From \_\_\_\_\_ to \_\_\_\_\_

Branch \_\_\_\_\_ Unit Designation \_\_\_\_\_

Military Service Number \_\_\_\_\_

Highest Rank Held \_\_\_\_\_

Type of Discharge \_\_\_\_\_

3. Were you ever disciplined while in the military service (include court-martial, Captain's masts, company punishment, etc.)? Yes ( ) No ( )

Charge #1 \_\_\_\_\_ Agency \_\_\_\_\_

Date \_\_\_\_\_ Age at time \_\_\_\_\_

Disposition \_\_\_\_\_

Charge #2 \_\_\_\_\_ Agency \_\_\_\_\_

Date \_\_\_\_\_ Age at time \_\_\_\_\_

Disposition \_\_\_\_\_

Charge #3 \_\_\_\_\_ Agency \_\_\_\_\_

Date \_\_\_\_\_ Age at Time \_\_\_\_\_

Disposition \_\_\_\_\_

If you received a discharge other than honorable, give complete details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**F. Special Qualifications and Skills**

1. List any special licenses you hold (such as pilot, radio, operator, scuba etc.)

Licensing authority \_\_\_\_\_

Date of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

Licensing authority \_\_\_\_\_

Date of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

Licensing authority \_\_\_\_\_

Date of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

2. List any specialized machinery or equipment you can operate:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If you are fluent in a foreign language, indicate in each area your degree of fluency.

Language \_\_\_\_\_

	Good	Fair	Excellent
Reading	( )	( )	( )
Speaking	( )	( )	( )
Understanding	( )	( )	( )
Writing	( )	( )	( )

4. List any other special skills or qualifications you may possess:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**G. Legal**

- 1. Have you ever been convicted or arrested by police or summonsed into court? Yes ( ) No ( ) if yes, complete the following (list juvenile as well as adult occurrences):

Police Agency \_\_\_\_\_ City/State \_\_\_\_\_

Crime Charged \_\_\_\_\_ Disposition \_\_\_\_\_

Police Agency \_\_\_\_\_ City/State \_\_\_\_\_

Crime Charged \_\_\_\_\_ Disposition \_\_\_\_\_

- 2. Have you ever been involved as a party in civil litigation? Yes ( ) No ( )

If yes, give details

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**H. Motor Vehicle Operation:**

- 1. Has your driver's license ever been suspended or revoked? Yes ( ) No ( )

If yes, give date, location and reason

\_\_\_\_\_

\_\_\_\_\_

- 2. Name of Auto Insurance Carrier \_\_\_\_\_

Branch \_\_\_\_\_ Policy# \_\_\_\_\_ Tele# \_\_\_\_\_

- 3. List to the best of your recollection all driving citations you have received as a juvenile and adult, excluding parking tickets:

Month/Year	Charge	City/State
Disposition		

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 4. Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I. Relatives**

- 1. Are you? Single ( ) Married ( ) Separated ( ) Divorced ( ) Widowed ( )

- 2. If married:

Spouse's Name (wife's maiden name) \_\_\_\_\_

Date Married \_\_\_\_\_ City/State \_\_\_\_\_

- 3. Ex-Spouse's Name (wife's maiden name) \_\_\_\_\_

Date Married \_\_\_\_\_ City/State \_\_\_\_\_

Present Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

State which: Separation ( ) Divorce ( ) Annulment ( )

Date of Order \_\_\_\_\_ Court/State \_\_\_\_\_

- 4. Emergency Contact(s)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

5. List all children related to you or your spouse (natural, step-children, adopted and foster)

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

6. List other dependents:

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Supported by: \_\_\_\_\_

7. List other relatives:

Mother \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Father \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Sibling \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Sibling \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**J. References & Acquaintances:**

List five persons who know you well enough to provide current information about you. Do not list relatives or former employers:

Name _____	Tele# _____
Address _____	
Business Name _____	Years known _____
Address _____	

Name _____	Tele# _____
Address _____	
Business Name _____	Years known _____
Address _____	

Name _____	Tele# _____
Address _____	
Business Name _____	Years known _____
Address _____	

Name _____	Tele# _____
Address _____	
Business Name _____	Years known _____
Address _____	

Name _____	Tele# _____
Address _____	
Business Name _____	Years known _____
Address _____	

**K. Financial:**

- 1. What is your present salary or wage? \_\_\_\_\_
- 2. Income from any source other than your principal occupation?  
Yes ( ) No ( )

If yes, how much? \_\_\_\_\_ How often \_\_\_\_\_

The source \_\_\_\_\_

- 3. Do you own any real estate? Yes ( ) No ( ) Value \_\_\_\_\_  
Location \_\_\_\_\_

Assets:

- 1. Type of Account \_\_\_\_\_ Account # \_\_\_\_\_  
Name(s) on account \_\_\_\_\_  
Average Balance \_\_\_\_\_
- 2. Type of Account \_\_\_\_\_ Account # \_\_\_\_\_  
Name(s) on account \_\_\_\_\_  
Average Balance \_\_\_\_\_

Liabilities:

- 1. Type of Account \_\_\_\_\_ Account # \_\_\_\_\_  
Name(s) on account \_\_\_\_\_  
Monthly Payment \_\_\_\_\_ Balance Due \_\_\_\_\_
- 2. Type of Account \_\_\_\_\_ Account # \_\_\_\_\_  
Name(s) on account \_\_\_\_\_  
Monthly Payment \_\_\_\_\_ Balance Due \_\_\_\_\_

Total outstanding debt at this time: \_\_\_\_\_

I hereby certify that there are not willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of employment.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

\_\_\_\_\_ County

Subscribed and sworn to before me on the \_\_\_\_\_ of \_\_\_\_\_ 20 \_\_\_\_.

As signed by \_\_\_\_\_ Commission Expiration \_\_\_\_\_  
Justice of the Peace/Notary Public

**APPENDIX G - IF REQUIRED**

**CONFIDENTIAL QUESTIONNAIRES TO EDUCATIONAL/EMPLOYERS/PHYSICIANS**

**COVER LETTER**

To Whom It May Concern:

The individual whose name appears on the attached questionnaire is being considered for employment by the Windham, New Hampshire NAME OF DEPARTMENT.

The applicant has informed us that you may have information which might be of assistance to us in reaching a decision as to whether or not this individual should be employed with this agency.

I am sure you will recognize the need to guarantee that persons appointed as POSITION TITLE are fully qualified to undertake the important responsibilities of that position. You may be of substantial assistance to us in this regard.

Please note that the applicant has authorized the release of the information requested. A copy of that authorization is attached.

We are quite anxious to expedite the processing of this applicant and would very much appreciate your prompt completion and return of the enclosed questionnaire in the self-addressed, stamped envelope provided herein.

You have my assurance that any and all information that you provide concerning this applicant will be held in strict confidence.

If you have pertinent information concerning this applicant, but would rather not put it in writing, please contact NAME AND POSITION OF DEPARTMENT HEAD at (603) PHONE NUMBER.

Your assistance is greatly appreciated.

Very truly yours,

NAME OF DEPARTMENT HEAD  
POSITION

Encl:            Authorization to Release Information  
                  Questionnaire  
                  Self-addressed, stamped envelope

**CONFIDENTIAL QUESTIONNAIRE TO EDUCATIONAL INSTITUTIONS**

To: \_\_\_\_\_  
Name of School

\_\_\_\_\_  
Street Town State Zip

Applicant's Name \_\_\_\_\_

Applicant's Maiden Name, If Applicable \_\_\_\_\_

Dates Attended: From \_\_\_\_\_ to \_\_\_\_\_

1. Was a Diploma or Degree awarded to this person?  Yes  No

If no, provide the details \_\_\_\_\_

2. What was this person's overall grade point average or class standing? \_\_\_\_\_

3. Was he/she ever suspended or placed on probation?  Yes  No

If yes, describe the circumstances \_\_\_\_\_

4. Did this person ever have difficulty getting along with students, instructors and  
or administrators?  Yes  No

If yes, please explain \_\_\_\_\_

Thank you for your assistance.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Title

**CONFIDENTIAL QUESTIONNAIRE TO EMPLOYERS**

To: \_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Street Town State Zip

Applicant's Name: \_\_\_\_\_ SS# \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

1. Are the employment dates correct?  Yes  No  
If no, what are the correct dates? From \_\_\_\_\_ to \_\_\_\_\_

2. What were this person's primary duties? \_\_\_\_\_

3. Gross Earnings per pay period? \_\_\_\_\_

4. Was this person's work considered to be satisfactory?  Yes  No  
If no, please describe deficiencies? \_\_\_\_\_

5. Is this person eligible for rehire?  Yes  No  
If no, please state reason (s) \_\_\_\_\_

6. What was the reason for termination of employment? (If applicable) \_\_\_\_\_

7. If the person resigned, was the resignation voluntary?  Yes  No  
If no, please explain: \_\_\_\_\_

8. Was there any problem with absenteeism or excessive use  
of sick leave?  Yes  No  
If yes, please explain: \_\_\_\_\_

9. Did this person get along well with supervisors, co-workers and/or the  
Public?  Yes  No  
If no, please explain: \_\_\_\_\_

10. Was there ever any reason to doubt this person's honesty? [ ] Yes [ ] No  
If yes, please explain: \_\_\_\_\_

11. Did this person ever collect Workmen's Compensation or other Disability Payments? [ ] Yes [ ] No

12. Did he/she ever have any personal domestic or financial problem which interfered with work? [ ] Yes [ ] No

13. Please describe this person's general reputation among co-workers and Supervisors.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for your assistance

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Title

**CONFIDENTIAL QUESTIONNAIRE TO PHYSICIANS**  
**(Only to be sent following a Conditional Offer of Probationary Employment)**

To: \_\_\_\_\_  
Name of Physician

\_\_\_\_\_  
Street Town State Zip

Applicant's Name: \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street Town State Zip

1. Is this individual currently receiving treatment or taking medication for any medical problem, including emotional disorders?  Yes  No

If yes, please describe the nature of the problem \_\_\_\_\_

- 
- 
2. Does this individual have any permanent disability or medical problem of which you are aware?  Yes  No

If yes, please explain \_\_\_\_\_

3. Do you know of any medical or other reason why this individual should perhaps not be employed as a POSITION TITLE?  Yes  No

If yes, please explain \_\_\_\_\_

---

**Thank you for your assistance.**

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Telephone Number Title



**APPENDIX H**

**TELEPHONE REFERENCE CHECK FORM - EMPLOYERS**

Name of Applicant: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Person Contacted: \_\_\_\_\_ Tel. No. \_\_\_\_\_

Title: \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_

Please verify the following information:

1. In what capacity did you know this person: \_\_\_\_\_
2. Dates of Employment: from \_\_\_\_\_ to \_\_\_\_\_  
(If applicable)
3. What were his/her duties? \_\_\_\_\_
4. What position(s) is s/he competent to fill? \_\_\_\_\_
5. Did s/he have any supervisory responsibilities? \_\_\_\_\_
6. On a scale of 1-5, 5 being highest, how would you evaluate his/her work? \_\_\_\_\_
7. What were his/her strong points? \_\_\_\_\_
8. What weaknesses, if any? \_\_\_\_\_
9. Would you rehire? \_\_\_\_\_

Questions specific to the position:

How would you rate, 1-5, his/her ability to perform the following (please define a 1 and a 5):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Name of interviewer: \_\_\_\_\_  
Title: \_\_\_\_\_

Date of interview: \_\_\_\_\_

**TELEPHONE REFERENCE CHECK FORM - PERSONAL**

Name of Applicant:\_\_\_\_\_

Position Applied for:\_\_\_\_\_

Person Contacted:\_\_\_\_\_Tel. No.\_\_\_\_\_

Address:\_\_\_\_\_ State:\_\_\_\_\_

Relationship to Applicant:\_\_\_\_\_

Please verify the following information:

1. In what capacity did you know this person?\_\_\_\_\_

2. Would you consider\_\_\_\_\_ as a close, personal friend or casual acquaintance?\_\_\_\_\_

3. Dates you've known them: from\_\_\_\_\_to\_\_\_\_\_

4. What were his/her strong points?\_\_\_\_\_

5. What weaknesses, if any?\_\_\_\_\_

6. How did\_\_\_\_\_ relate with other people? \_\_\_\_\_

7. What would you consider\_\_\_\_\_ 's interests outside of the work or professional environment? \_\_\_\_\_

8. Any additional comments you would like to add. \_\_\_\_\_

**APPENDIX I**

*To order a credit report:*

Equifax      1-800-888-4213

Experian     1-888-397-3742

**APPENDIX J****Pre-employment Physicals**

The Town of Windham conducts pre-employment physicals and drug screening through Salem Occupational Acute Care & Urgent Care (“the clinic”), 22 Main St, Salem NH 03079. All potential employees will undergo a “Standard Pre-Placement Physical” which will include the areas identified on the attached list (Exhibit 1). A current price list for all tests is included as Exhibit 2. Appointments require a 24 hour notice and shall be coordinated through the Human Resource Coordinator. The Town will supply the job description to the clinic and the clinic’s doctor will sign-off on the job description or state any accommodations/limits. Additionally, every potential employee will undergo a 5-panel drug screening for an additional fee.

In addition to the areas listed on Exhibit 1, the following classification of personnel shall undergo additional tests as follows:

Police Dispatch - hearing test for an additional fee.

Police department sworn officers and Firefighter/EMT’s - will be examined by the clinic’s physician under standards set forth by NH Police Standards & Training and NFPA 1500, respectively. This includes the following:

Physical Examination - per Exhibit 1	CBC w/ Differential
Comprehensive Metabolic Profile	Electrocardiogram (EKG)
Pulmonary Function Test	Audiogram
Non-DOT 5 Panel Drug Test	X-Ray Chest (PA & Lateral) w/ Reading
PPD	UA/Dip
Vision Screening	Hepatitis B Vaccine
	Tetanus Vaccine

Police and Fire personnel - Tuberculosis screening for an additional fee.

Highway, Transfer, Maintenance and Planning (Inspection) personnel - will be offered the Hepatitis and Tetanus vaccines (unless they have records of previous vaccinations).

Town Beach Lifeguards - will be offered the Tetanus vaccines (unless they have records of previous vaccinations).

**Test Results**

For Police and Fire, the clinic will contact the respective Chiefs to provide a verbal confirmation of the candidate’s successful examination results, with a signed form sent via mail for inclusion in the employee’s official personnel file. For all other departments, the Human Resource Coordinator will be notified, and will notify the respective Department Head. If, as a result of the pre-employment exam, there are any concerns noted by the clinic doctor, a “medical hold” letter will be given to the Town indicating any required restrictions or further testing or follow-up with the candidate’s personal physician. For the drug test, the Town will receive the employer copy of the chain of custody report and test results.

Exhibit 2

**SOAC Pricing Schedule**  
(effective Dec 2006)

Basic Pre-Employment Physical	\$65.00
5 Panel Drug Screening	\$45.00
Police/Fire Physical w/ Hepatitis B & Tetanus (reflects 5% discount off standard clinic prices)	\$501.60
Tuberculosis Screening	\$15.00
Audiogram	\$30.00
Hepatitis B & Tetanus Vaccine	\$86.00



**& URGENT CARE OF SALEM**

## **STANDARD PRE-PLACEMENT PHYSICAL**

### **Employees' self completion of:**

- Personal medical history
- List of current medications
- Vaccination status and allergies
- List of prior surgeries and hospitalizations
- Personal health habits – smoking, alcohol use, exercise
- Occupational exposure and health history
- List of prior workers compensation injuries
- List of hobbies with exposures
- Name of personal physician and date of last exam
- Family medical history

### **Examination:**

- Vision – Near, Far, Color
- Screening hearing - whisper voice
- Vital signs – BP, pulse, ht., Wt., Calculation of body mass index
- Change into Johnny and underwear
- Skin exam
- Eye, ear and mouth exam
- Heart, lungs, abdomen exam
- Hernia check
- Musculoskeletal exam
  - Tendon reflexes
  - Range of motion
  - Basic strength test
  - Spine exam – looking for scars, asymmetry, abnormalities
- Gait
- Balance
- Upper extremities – finkelstein maneuver phalen tinel tests
- Discussion of physical requirements of new job

### **Discussion:**

- Of health risks

### **Discussion:**

- Of examination results

### **Recommendations for:**

- Work restrictions
- Further medical evaluations